PTO/SB/06 (08-03) Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays valid OMB control number. Apply ation propode Thomper PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 RUE CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR RATE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS 5 (37 CFR 1.16(b)) minus OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL OR TOTAL \* If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST ⋖ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA** AMENDMENT **AFTER** PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus X \$ OR Independent (37 CFR 1.16(b)) Minus x s OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\omega$ PRESENT RATE RATE REMAINING NUMBER ADDI-ADDI-**PREVIOUSLY EXTRA** TIONAL TIONAL ENDMENT **AFTER** AMENDMENT PAID FOR FEE FEE Minus Total (37 CFR 1.16(c)) X \$ OR Minus Independent (37 CFR 1.16(b)) X \$ OR Σ

		(Column 1)		(Column 2)	(Column 3)	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total (37 CFR 1.16(c))	*	Minus	**	=	
	Independent (37 CFR 1.16(b))	•	Minus	***	#	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
x s=		OR	x \$=	
x \$=		OR	x \$=	
+ \$=		OR	+ \$=	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

OR

OR

TOTAL

ADD'L FEE

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL

ADD'L FEE

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I** SMALL ENTIFY OTHER THAN (Column 2) (Column 1) TYPE DE OR **SMALL ENTITY FOR NUMBER FILED** NUMBER EXTRA FEE RATE RATE FEE 345.00 **BASIC FEE** 690.00 OR 2() minus 20= **TOTAL CLAIMS** X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X39= X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +130= +260= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II mi sioumberell **OTHER THAN SMALL ENTITY** SMALL ENTITY OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-⋖ REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE **PREVIOUSLY** ENDMENT AFTER **EXTRA** FEE -£EE AMENDMENT PAID FOR Total Minus X\$ 9= X\$18= OR Minus Independent X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL TOTAL ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST **CLAIMS** ADDI-ADDI-8 REMAINING NUMBER PRESENT RATE TIONAL RATE **AMENDMENT PREVIOUSLY** TIONAL AFTER **EXTRA** AMENDN ENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent **Minus** X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 3) Column 1) (Column 2) HIGHEST CLAIMS ADDI-ADDI-O NUMBER REMAINING PRESENT RATE TIONAL AMENDMENT **AFTER PREVIOUSLY** RATE TIONAL **EXTRA** PAID FOR **AMENDMENT** FEE FEE Total Minus X\$ 9= X\$18= OR Minus Independent X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ADDIT. FEE

""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number